

233284

## STATE OF SOUTH CAROLINA

## (Caption of Case)

Example: Application for a Class C Charter Certificate from  
John Doe dba Doe's Limo

Address change

BEFORE THE  
PUBLIC SERVICE COMMISSION  
OF SOUTH CAROLINA

## TRANSPORTATION COVER SHEET

## DOCKET

NUMBER: \_\_\_\_\_

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

Vernon Everett Short, Jr.

(Please type or print)

Submitted by: Vernon Everett Short, Jr. Telephone: (336) 460-2145

Address: 4152 Lightkeepers Way Fax: \_\_\_\_\_  
Unit 38C  
Little River, SC 29516 Other: \_\_\_\_\_

Email: \_\_\_\_\_

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

## NATURE OF ACTION (Check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Application - Class A/A Restricted   | <input checked="" type="checkbox"/> Request for Name Change on <u>Order</u> |
| <input checked="" type="checkbox"/> Application - Class C Taxi  | <input type="checkbox"/> Request to Amend Scope of Authority                |
| <input type="checkbox"/> Application - Class C Charter  | <input type="checkbox"/> Request to Amend Tariff (rate increase, etc.)      |
| <input type="checkbox"/> Application - Class C Charter Bus  | <input type="checkbox"/> Request to Amend Passenger Limit                   |
| <input type="checkbox"/> Application - Class C Non-Emergency  | <input type="checkbox"/> Request  |
| <input type="checkbox"/> Application - Class C Stretcher Van  | <input type="checkbox"/> Exhibit  |
| <input type="checkbox"/> Application - Class E Household Goods  | <input type="checkbox"/> Late-Filed Exhibit                                 |
| <input type="checkbox"/> Application - Class E Hazardous Waste  | <input type="checkbox"/> Letter   |
| <input type="checkbox"/> Application  | <input type="checkbox"/> Proposed Order                                     |
| <input type="checkbox"/> Request for Extension to Comply with Order   | <input type="checkbox"/> Publisher's Affidavit                              |
| <input type="checkbox"/> Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded | <input type="checkbox"/> Reservation Letter                                 |
| <input type="checkbox"/> Request for Cancellation of Certificate  | <input type="checkbox"/> Response   |
| <input type="checkbox"/> Request for Suspension   | <input type="checkbox"/> Return to Petition                                 |
| <input type="checkbox"/> Request for Reinstatement  | <input type="checkbox"/> Other: _____                                       |

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

Request to Amend name on Application listed in Order Granting Authority before a Certificate Has  
Been Issued

<b>File the original with:</b>  <b>Public Service Commission of South Carolina Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199</b>	<b>Mail or fax a copy to:</b>  <b>S.C. Office of Regulatory Staff Transportation Department 1401 Main St, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815</b>
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DATE: November 7, 2011

The PSC issued Order No. 2011-730 (Docket No. 2011-393-T) on October 4, 2011 which granted authority for a Class C Taxi Certificate in the name of "Vernon Everette Short, Jr. DBA EZ Cab." At the time of filing the initial application, the applicant filed the business name as a DBA and now he has changed to an LLC.

Please consider this as a request to amend the name in Order No. 2011-730 to be E Z Cabs, LLC.

E Z Cabs, LLC DBA N/A  
(Amended Name of Company) (If applicable)

1331 Melanie Lane Myrtle Beach, SC 29577  
(Street Address) (City, State, Zip Code)

\_\_\_\_\_  
(Mailing Address if different from street address)

336-460-2695  
(Telephone Number)

1331 Melanie Lane, Myrtle Beach, SC  
(Street and/or Mailing Address) 29577

\_\_\_\_\_  
(Email Address)

  
(Signature)

\_\_\_\_\_  
Owner  
(Title) Owner, President, etc.

# *The State of South Carolina*



*Office of Secretary of State Mark Hammond*

## **Certificate of Existence**

**I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:**

E Z CABS, LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on October 12th, 2011, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great  
Seal of the State of South Carolina this  
13th day of October, 2011.

  
Mark Hammond, Secretary of State